

- (b) ☒ Enclosed
☒ Amendment/Reply
☐ Affidavit(s)/Declaration(s)
☒ Information Disclosure Statement (IDS)
☐ Other:

2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103 (c) for a period of months (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17 (i) required)
b. ☐ Other:

3. Fees [The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.]

The fees are calculated as follows:

- (a) ☒ RCE fee required under 37 C.F.R. § 1.17(e): \$810.00
(b) ☐ Other: \$0.00

Total Fees: \$810.00

PETITION FOR EXTENSION OF TIME

4. (a) ☒ Applicant petitions for an extension of the time for the total number of months checked below:

<input type="checkbox"/>	One Month.	Fee in the amount of	\$	120.00
<input type="checkbox"/>	Two Months.	Fee in the amount of	\$	460.00
<input type="checkbox"/>	Three Months.	Fee in the amount of	\$	1,050.00
<input type="checkbox"/>	Four Months.	Fee in the amount of	\$	1,640.00
<input checked="" type="checkbox"/>	Five Months.	Fee in the amount of	\$	2,230.00

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension for month(s) has already been secured and the fee paid therefor of \$0.00 is deducted from the total fee due for the total months of extension now requested.

OR

- (b) ☐ Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

Extension fee due with this request: \$2,230.00

5. Claim fee calculation

CLAIMS AS AMENDED					
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) HIGHEST NUMBER PAID FOR	(4) NUMBER EXTRA x RATE		(5) ADDITIONAL FEE
TOTAL CLAIMS	103	144	0	x \$ 50.00	0.00
INDEPENDENT CLAIMS	5	8	0	x \$ 260.00	0.00
MULTIPLE DEPENDENCY FEE				\$ 370.00	
				Total Amendment Fee:	\$0.00

6. Method of Payment of Fees:


Charge Deposit Account No. 01-1425 in the amount of: \$3,040.00.
A duplicate of this transmittal is attached.

7. Instructions as to Overpayment:

Credit any overpayment to Deposit Account No. 01-1425.

8. Authorization to Charge Additional Fees

☒ If any additional extension and/or fee for claims is required, charge
Account No. 01-1425.


Elizabeth M. Barnhard
Attorney for Applicants
Reg. No. 31,088

Wyeth
Patent Law Department
Five Giralda Farms
Madison, NJ 07940
Tel. No. (845) 602-1842

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